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Navy & Marine Corps Medical News

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Headline: Navy Medicine Provides Health Care Assistance to Honduras

By Earl W. Hicks, Bureau of Medicine and Surgery

WASHINGTON -- Honduras has become a country of citizens traumatized by the devastation of Hurricane Mitch. As the count of dead and missing grows into thousands of victims, an American Joint Task Force, including Navy medical teams, is in country helping the starving and homeless recover from floods and landslides that took lives and homes.

Navy medical professionals were deployed to Honduras November 10 to augment the Joint Task Force there, providing public health and psychological counseling assistance to the country's citizens in the wake of Hurricane Mitch.

To a country suffering from tremendous damage to its public health infrastructure, the physicians, public health specialists, entomologists, laboratory and preventive medicine technicians attached to Navy Environmental and Preventive Medicine Unit No. 5 in San Diego, Calif., were very welcome. Unit 5 efforts are being complemented by a Navy Disease Vector Ecology and Control Center team from Jacksonville, Fla. Both units, among other tasks, are providing safe water sources by testing for contamination and initiating controls for insect-transmitted diseases such as malaria and dengue fever.

These medical personnel were joined at Soto Cano Air Base by the Special Psychiatric Rapid Intervention Team, or

SPRINT, from Naval Medical Center San Diego, Calif. The SPRINT usually provides short-term mental health and emotional support immediately after a disaster, trying to minimize the impact of traumatic stress on rescuers and victims. In Honduras, they are not only counseling American military and Honduran civilians, they are also training Honduran mental health professionals in crises intervention.

According to LCDR Paul Hammer, MSC, a member of the SPRINT detachment, the SPRINT members immediately moved into action and are already helping adults and children.

"It was apparent that the [Honduran] mental health professionals were very concerned about the effect of the disaster on the children," he said. "We got a team working on that right away and they developed some training materials designed for helping children"

Navy medicine's support of the Joint Task Force effort will continue when a second preventive medicine team from the Navy Environmental and Preventive Medicine Unit No. 2 in Norfolk, Va., and the Navy Disease Vector Ecology and Control Center, Bangor, Wash., deploy to Honduras. Karen Murphy, Naval Environmental Health Center Norfolk; Doug Sayers, Naval Medical Center San Diego and LCDR Paul Hammer, Joint Task Force Honduras provided information for this story.

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Headline: Operation Provide Hope in Armenia

By Earl W. Hicks, Bureau of Medicine and Surgery

WASHINGTON -- Navy medical teams are revisiting Armenia as a follow-up to a continuing mission that supplies medical equipment to this republic of the former Soviet Union during its transition to democracy and a free market economy.

Military medical specialists will travel to Yerevan, Armenia, to conduct an assessment of the medical equipment installed during a previous Provide Hope mission in 1996. The Provide Hope medical team members are from U.S. Naval Hospitals in Sigonella, Sicily; Rota, Spain; Naples Italy, and from the U.S. Army Medical Center in Europe.

During the operation's early phases, a site survey team comprising medical experts, will visit eight Armenian medical facilities to inspect American donated medical equipment. They can then identify needed repairs and perform a reassessment to tailor aid to each medical facility. In addition to determining what repair parts and materials are needed, the team will also assess training and needed consumable items such as chemicals and x-ray paper. Supplies will be ordered in quantities that will sustain the facilities for two years.

The medical team will return to Yerevan in April 1999. During the final phases, medical repair technicians will again repair any problem equipment and conduct intensive training on equipment operation and health related topics.

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Headline: Quantico medical team supports 23rd Marine Corps

Marathon

By LCDR Joe Myers, MSC, Naval Medical Clinic Quantico

QUANTICO, Va. -- The weatherman cooperated October 25 and 18,000 runners participating in the 23rd Marine Corps Marathon, the third largest marathon in the world, had a beautiful sky with moderate temperatures in which to run their 26.3-mile race.

As runners began at the Iwo Jima Memorial and headed around sites such as the White House and the Washington and Lincoln Memorials, Navy Medical personnel from Naval Medical Clinic in Quantico, Va., along with other medical teams, were deployed to provide emergency medical assistance. It was a challenging task as more than 100,000 onlookers were spread out along the route.

Providing emergency medical service for the marathon required coordination between Navy and civilian medical providers. In addition to the Naval Medical Clinic Quantico staff, there were 25 ambulance crews provided by local communities. An elaborate communications and tracking system, including a wireless Local Area Network, helped the emergency teams coordinate their efforts.

In addition to the Quantico corpsmen and doctors, 150 volunteers from the National Naval Medical Center in Bethesda, Md., and other Army and Air Force facilities in the area were also present. By the end of the race, they treated more than 500 people in the seven battalion aid stations located throughout the course and at the large primary medical tent.

The efforts of the medical personnel did not go unnoticed. Secretary of Defense, William Cohen, and Chief of Naval Operations, ADM Jay Johnson took time out to greet medical personnel and thank them for a job well done.

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Headline: Great Lakes captures Governor's Award for pollution prevention

BY: LT Youssef H. Aboul-Enein, MSC, Naval Hospital Great Lakes

GREAT LAKES, Ill. -- Naval Hospital Great Lakes was the only federal installation and the only healthcare organization to recently receive an award from Illinois Governor, Jim Edgar, for reducing hazardous waste and toxic emissions.

The hospital was among 23 organizations and businesses capturing an award. In a press October 29th release Governor Edgar said, "These companies, organizations and educational institutions are proving that pollution prevention is good for the environment and makes economic sense."

Donn Stiner and Maria Sus, the hospital's environmental specialists, accepted the award on behalf of the entire environmental team at Great Lakes.

Stiner said, "This was a group effort by personnel from

many diverse departments and ...commands, whose dedication to pollution prevention measures earned this award."

Those from the hospital who contributed to the pollution reduction methods were LCDR Steven Schultz, DC and Ernest Penderson, of the hospital's environmental specialist team, who designed mercury removal systems, which significantly reduced mercury from dental amalgam and sphygmomanometers released into the sanitary waste system. Hospital Corpsman First Class Sydney Davis of the hospital's dental facility contributed to that effort by using Environmental Protection Agency-approved laboratory procedures to test for mercury content. Their combined efforts over 4 years reduced mercury emissions from 100,000 parts per billion to 9 parts per billion representing an annual savings of \$50,000 in hazardous removal costs.

Other initiatives recognized included the solvent recovery system. Hospital Corpsman First Class Mark Potts, who works in the hospital's pathology lab and Lila Johnson, a member of the environmental specialist team, collaborated to extract 95 percent of medical chemicals from laboratory reagents for reuse during a process called fractional distillation. This translates to saving the hospital \$21,000 per year.

LTJG David Gerstein, MSC, the command assistant lab officer said, "Not only does the solvent recovery program work, it makes good economic sense. The program paid for itself within nine months of installation."

The Material Management Department was also recognized for eliminating hazardous material and implementing improved hazardous material acquisition control and substitution processes. Material Management staff reduced by 50 percent hazardous line items listed in the authorized use list. That effort decreased the amount of expired hazardous material requiring disposal from 1,713 pounds in 1995 to 270 pounds in 1997.

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Headline: Senator, Congressman support Medicare subvention
By Lt. Rick Haupt, USN, TRICARE Southern California

SAN DIEGO -- Two members of Congress spoke out in support of Medicare subvention at a ceremony kicking off TRICARE Senior Prime at the Naval Medical Center here yesterday. Sen. Dianne Feinstein (D-Calif.) and Rep. Bob Filner (D-Calif.) saluted the efforts of retirees and military medical personnel who brought the program to fruition, noting its potential to address the issues of the promise of lifetime health care for military retirees, military readiness, and cost-savings to retirees and taxpayers. Sen. Feinstein spoke highly of TRICARE Senior Prime and firmly expressed her support for Medicare funding DOD for the care of their age 65 and over retirees. "It's a real step forward, because one of the pledges that the Congress and the military has made to the people

that serve our country, is that forever after, your healthcare will be taken care of by the United States government," Feinstein said. "We need to keep that pledge, and it becomes difficult in a day of diminishing resources. This demonstration project is there to really see if we can really give people continuing coverage with very little, or no copay. I'm very pleased to be here, to salute those who began this effort and to pay tribute to those who will carry it out," she said.

Rep. Filner echoed Sen. Feinstein's sentiments and noted the need for good benefits for military members to facilitate recruitment and retention.

"The exclusion of our retired personnel from military health care system has undermined the whole long-term interest of this nation," Filner said. "A crucial aspect to military readiness is supplying the incentives for high-quality personnel to continue to serve full military careers. We know that offers of lifetime healthcare benefits are one of the prime incentives that induced many current retirees to serve military careers that often spanned two or three wars. They are properly upset at broken promises, and we are going to remedy that starting today.

"Another consideration is the recruitment and retention of our military medical personnel," he added. "Medical personnel must see and treat a wide variety of patients with a broad spectrum of medical problems. Medicare-eligible retirees provide that clinical experience.

"This is such a common sense idea and so simple, that it's difficult to imagine it took so long to get," said Filner, noting the eleven years that have passed since the idea of Medicare subvention was born. "This is the first step, a good first step in our fight to allow military retirees and veterans to use their Medicare benefits at the military and VA hospitals.

"We're going to learn, once and for all, that military hospitals can treat older retirees for less than Medicare pays civilian providers," Filner added. "We know this is the case and we're going to prove that right here.

"I hope this demonstration will be carried on to the VA hospitals in addition to the military hospitals," Filner said. "Medicare subvention and TRICARE Senior Prime is an idea that makes sense for everybody."

TRICARE Senior Prime enrollees will enjoy the benefits of both TRICARE Prime, the military's managed care health plan, and a Medicare HMO. The subvention demonstration is slated to run through December 31, 2000.

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Headline: Navy Surgeon General leads AMSUS
From Bureau of Medicine and Surgery

WASHINGTON -- The Association of Military Surgeons United States, better known as AMSUS, recently ended its 105th annual meeting, held this year in San Antonio, Texas, with

Surgeon General of the Navy, VADM Richard Nelson, being named as president of the organization for 1999. It was Nelson's first AMSUS meeting as surgeon general of the Navy.

AMSUS represents many federal health care organizations, including the Bureau of Medicine and Surgery, the Air Force Medical Service, the Army Medical Department, the Department of Veterans Affairs and the U.S. Public Health Service. Since it was established in 1891, the organization has helped improve health care by providing a forum for discussion of ideas and problems and by providing continuing education for its members.

Nelson said that he was looking forward to his year of providing leadership to AMSUS and helping to continue the organization's excellent work in furthering the advancement of medical knowledge. Next year's meeting in Anaheim, Calif., will have a theme of health care education, which Nelson said is an investment for future health care.

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Headline: TRICARE question and answer

Question: If I have a grievance for services rendered under the TRICARE program, who can I contact?

Answer: Any grievance should be reported to the MTF Commander or Lead Agent. Generally, the regional Managed Care Support contractor will be responsible for grievances for services rendered by civilian network providers under the TRICARE program. Contact the nearest TRICARE Service Center for more information.

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Headline: Healthwatch Caffeine: Grounds for Debate

By LTJG Chris Moore, MSC, Naval Medical Center Portsmouth

Portsmouth, Va. -- Caffeine is a mildly addictive substance that stimulates the central nervous system. The effects of this stimulant differs for individuals depending on factors such as the quantity consumed, whether that quantity was taken all at once or over time and the caffeine tolerance level of the user.

Most people develop a tolerance rather quickly. Caffeine may increase blood pressure, raise blood cholesterol, and cause irregular heartbeats for those who are unaccustomed or sensitive to its use. In addition, excessive intake of caffeine, as in four cups of coffee a day, has been known to produce side effects such as dizziness, agitation, restlessness, headaches, intestinal discomfort, diarrhea, and insomnia.

The Food and Drug Administration states that pregnant and breast feeding women should limit their use of caffeine products or avoid them completely.

In the United States, coffee consumption represents 75 percent of all caffeine consumed; soft drinks represent 15 percent and 10 percent is derived from tea, chocolate, and medication.

Caffeine can show up in common cold medications, allergy

pills, diet pills, headache remedies, and even sometimes as a flavoring agent in baked goods, frozen desserts, and puddings. Caffeine concentration can be summarized as follows: coffee (100mg/cup), tea (50 mg/cup), cola drinks (35 mg/12 oz.), and chocolate (6 mg/oz).

Caffeine is not all bad, however. It temporarily reduces muscular fatigue, increases speed and efficiency of mental and manual tasks, and even stimulates creativity. By acting as a gentle laxative agent, caffeine has been used to alleviate constipation.

Caffeine, at doses equivalent to one cup of coffee, raises the metabolic rate slightly for a couple of hours. If a person wanting to lose weight could refrain from making up this energy deficit with food, these small changes in the metabolic rate (75-100 calories/day) could lead to a substantial weight loss.

Athletes can improve their endurance and make work-outs seem easier with moderate caffeine consumption (equivalent to 2-3 cups coffee) one hour before exercise. Caffeine facilitates the release and utilization of the body's fatty acids as a source of energy exercise. Thus, muscle glycogen is saved for later stages of prolonged aerobic events. Caffeine-containing beverages, due to their diuretic effect, should be used in addition to other fluids, not as a substitute.

Research studies that identify caffeine as a health concern are not conclusive. In fact, many studies linking caffeine to disease are criticized for not being scientifically sound and not considering real-life caffeine-consumption. As research continues to investigate caffeine's impact on health, a moderate intake of 200-300 mg of caffeine per day is suggested. Moderation makes good sense.

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Comments about and ideas for MEDNEWS are welcome. Story submissions are encouraged. Contact MEDNEWS editor, Earl Hicks, at email: mednews@us.med.navy.mil; Telephone 202/762-3223, (DSN) 762-3223, or fax 202/762-3224.

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